

# 5th World Congress on Family Law and Children's Rights

23 – 26 August 2009 Halifax, Nova Scotia, Canada

## **REGISTRATION FORM**

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The PREFERRED

METHOD of

REGISTRATION is

via the WEB at
www.lawrights.asn.au

A DECICEDATION INFORMATION DI CILI DI CON LETTERO III III				
A. REGISTRATION INFORMATION - Please fill in BLOCK LETTERS (Complete one Registration	ICS use only			
PLEASE NOTE: By completing this Registration Form, you have released your contact information for use by the 5th World Congress on Family Law and Children's Rights (WCFLC 2009) and you have read, understood and				
agree to all cancellation policies and terms and conditions outlined throughout this form,				
website.				
First Name: Family Name (Surname):				
Preferred Name for Badge:				
(Badge will show First and Family Name unless otherwise indicated here)				
□ Justice □ Professor □ Dr. □Mr. □Mrs. □Ms. (Check one) Position:				
Organization:				
Address:				
City: Prov./State:Postal/Zip Code:	Country: _			
Phone: (Country Code: Fax: (Country Code:				
E-mail:(Mandatory – confirmation letter will be provided via email)				
lacktriangle A participant list may be included in the Congress Satchel, please check the box if you $lacktriangle$	NOT want your name	e to be includ	led.	
Please indicate special requirements (e.g. dietary/mobility):				
B. FULL REGISTRATION includes: Name Badge, Sessions, Abstracts, Opening Plenary	Walcome Recention	n Scheduler	Lunches	
Coffee Breaks & Congress Satchel. Please check the appropriate box. (Maritime Reception			Lariones,	
Early Regular Late/O	n-Site	Total Co	st	
(On or before May 31, 2009) (Between June 1, 2009 and July 19, 2009) (Between July 20, 2009)				
☐ Full Delegate \$795.00 CAD \$995.00 CAD \$1,295.0	00 CAD	\$	CAD	
C. SINGLE DAY REGISTRATION includes: Name Badge, Sessions, Lunch and Coffee Brea		attendance.		
Opening Plenary and Welcome Reception available only for Sunday, August 23 Registrations	)			
Please check the date of Single Day attendance: (No multiple days permitted)				
□Sunday, August 23, 2009 □Monday, August 24, 2009 □Tuesday, August 25, 2009	□Wednesday, Auç	just 26, 2009	)	
Early Regular Late/O	n-Site	Total Cost	t	
(On or before May 31, 2009) (Between June 1, 2009 and July 19, 2009) (Between July 20, 2009 and July 19, 2009)	= : :	•	0.45	
☐ Single Day \$450.00 CAD \$500.00 CAD \$550.0	0 CAD	\$	CAD	
REGISTRATION (FULL OR SINGLE	DAY) SUBTOTAL	\$	CAD	
Payment must be received on or before May 1, 2009 to qualify for the Early Registration Fee				
the Regular Registration Fee. Registrations received after July 19, 2009 will be processed and the processed until newment is received in full	d onsite at the Cong	ress. Regis	rations will	
not be processed until payment is received in full.				
<b>D. ACCOMPANYING PERSON REGISTRATION includes:</b> Name Badge, Opening Plenary include access to Sessions. Accompanying Person Registration is only available to guests of			e does not	
include access to dessions. Accompanying religion registration is only available to guests or	Tull Hegistration Dele	gales.		
Regular Late/O				
(On or by July 19, 2009) (Between July 20, 2009 a		•	040	
, , ,	00 C <b>A</b> D	\$	CAD	
□Professor □ Dr. □Mr. □Mrs. □Ms. (Check one)				
First Name: Family Name (Surname):				
Preferred Name for Badge: (Badge will show First and Family Name unless otherwise indicated here)				
Diagon indicate appoint requirements (a.g. diaton/mahilibr):				
Please indicate special requirements (e.g. dietary/mobility):	ON SUBTOTAL	\$	CAD	



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	: Included in FULL Registration & catering purposes, please indi						
	te at <u>www.lawrights.asn.au</u>	cate below ii	you plan to a	allenu. Fo	i more imormation or	i illese evenis	, piease
Opening Planary & Wales	ama Dagantian		[	Delegate	Accompanying I	Person (if applic	able)
Opening Plenary & Welco Sunday, August 23, 2009			Ţ	□Yes □No	□Yes □N	0	
ADDITIONAL TICKETS (Ple	ase indicate if you require additi	onal tickets):					
Opening Plenary & Welco Sunday, August 23, 2009			# of tickets_	@	\$75.00 CAD/ticket =	: \$	CAD
Maritime Reception & Lobster Dinner Tuesday, August 25, 2009 (19:00 – 23:00) (NOT INCLUDED IN REGISTRATION – TICKETS MUST BE PURCHASED SEPARATE		N SEDADATEI V	# of tickets_	@	\$95.00 CAD/ticket =	\$	_ CAD
		DOLFANATEET	SOCIAL FUNCTIONS SUBTOTAL \$				CAD
Tours are sold on an opt	EING TOURS: For more informational basis and are dependent ments are not met. Please indic	upon availab	ility. ICS rese				
1. Deluxe Historic Halifa (Check appropriate boxes	ax City Tour (3 Hours) – Daily [ ⑸	Departures a	t 9:00 and 13	3:00			
	☐ Monday, August 24 ☐ 13:00 – 16:00	☐ Tuesday,	August 25		□ Wednesday, A	ugust 26	
9.00 - 12.00	13.00 - 16.00		# of tickets_	@	\$44.00 CAD/ticket=	\$	CAD
2. Peggy's Cove Tour S (Check appropriate boxes	ightseeing (3 Hours) – Departu	ures at 13:00					
☐ Monday, August 24	☐ Wednesday Augus	t 26	# of tickets_	@	\$48.00 CAD/ticket=	\$	CAD
3. Lunenburg & Mahone (Check appropriate boxes	e Bay Sightseeing (6 Hours) –	Departures a	nt 10:00				
☐ Sunday, August 23	☐ Tuesday, August 25		# of tickets_	@	\$98.00 CAD/ticket=	\$	CAD
Note: If you are interest at wcflc2009-tours@med	ted in purchasing Children tou et-ics.com		-	-	_	-	rtment
					TOURS SUBTOTAL		CAD
tour you are interested in	RESS TOURS The following tours on attending and a representative ent directly at <a href="wcflc2009-tours@">wcflc2009-tours@</a>	e from ICS v	vill be in toud				
☐ Atlantic Canada Ench	nanting Island Tour (8 Days/7 N	lights) - startir	ng from \$1,90	6.00 C <b>A</b> D	per person for double	occupancy.	
☐ Circle Newfoundland double occupancy.	i & Labrador Tour (12 Days/1	1 Nights or	13 Days/12 N	Nights) - st	arting from \$2,699.00	OCAD per pe	rson for
reserves the right to cancel	<b>Dicies:</b> All tours are sold on an optio any or all tours and excursions at a o in writing, no later than 30 days pri	ny time, if minii	mum number r	equirements	are not met. If you wisl	h to cancel a pro	e-booked

cancelled. No refunds will be issued within 30 days prior to departure.



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H. ACCOMMODATION: Hotel choices are the Halifax Marriott Harbourfront, Delta Barrington and Delta Halifax. For additional information, please view the Congress Website at <a href="www.lawrights.asn.au">www.lawrights.asn.au</a>. If you have questions regarding your accommodation, please contact <a href="www.lawrights.asn.au">WCFLC2009-registration@meet-ics.com</a>.

Please indicate hotel selection and room type by checking appropriate boxes.

HALIFAX MARRIOTT HARBOURFRONT	ROOM TYPE
☐ Standard Room @ \$189.00 CAD	☐ King ☐ 2 Double Beds
☐ Executive Room @ \$199.00 CAD	☐ King Bed
DELTA BARRINGTON (100% Non-smoking)	ROOM TYPE
☐ Delta Room @ \$164.00 CAD	☐ Queen ☐ 2 Double Beds
☐ Premier Room @ \$179.00 CAD	☐ Queen ☐ Double Beds
☐ Deluxe Room @ \$194.00 CAD	☐ King ☐ Queen ☐ 2 Double Beds
☐ Signature Club @ \$194.00 CAD	☐ King
DELTA HALIFAX	ROOM TYPE
☐ Delta Room @ \$164.00 CAD	☐ King ☐ Queen ☐ 2 Double Beds
☐ Delta Harbour View Room @ \$179.00 CAD	☐ King ☐ Queen ☐ 2 Double Beds
☐ Premier Room @ \$179.00 CAD	☐ King ☐ Queen ☐ 2 Double Beds
☐ Premier Harbour View Room @ \$194.00 CAD	☐ King
☐ Junior Suite @ \$194.00 CAD	☐ King
Arrival Date: Departure Date:	# of Nights:# of Rooms Required:
Room Preference 🔲 Smoking 🖵 Non-smoking 🖵 Wheelchair Access	sible
Special Requirements (allergies/mobility/etc.)	
will be sharing a room with: ☐ Accompanying Person(s) Please of	elearly print name(s):
	, p
	)
Credit card number to guarantee your reservation (for hotel use only	) Uisa  MasterCard  American Express
Credit Card Number	Expiry Date/
Cardholder's Name Ca	ırdholder's Signature
f you do not have a credit card, you may send a cheque or bank transfer deponotel reservation. Please note, if you are requesting a suite, please contact amount. Reservation requests received without a valid credit card number, check nformation as noted in the payment section below.	ct us at WCFLC2009-registration@meet-ics.com to determine deposit
*Fo	r hotel cheque or bank transfer deposit only \$ CAD

#### ACCOMMODATION - CANCELLATION AND RESERVATION CHANGES

Please note that up to and including **Sunday, July 19, 2009**, cancellations or changes to arrival and departure dates (based on availability) of existing bookings are to be performed by the WCFLC 2009 Congress Secretariat (please do not contact the hotel directly). Cancellations or changes WILL NOT be accepted by phone. All cancellations or changes must be requested in writing by mail, fax or email (preferred). Please note, Delegates will be asked to contact the hotel directly for new reservations or changes after **Sunday, July 19, 2009** for ease of booking. Hotel contact information will be available on the Congress Website from this date forward.

#### **CANCELLATION POLICY**

Cancellations must be made no later than 72 hours prior to arrival to avoid a penalty charge of one night's room and tax which will be applied to the credit card on file or loss of cheque or bank transfer deposit.

Please Note: Failure to arrive on the scheduled arrival date will result in cancellation of the hotel reservation and a charge equal to one night's room and taxes or more will be charged to the credit card number given above or loss of cheque or bank transfer deposit. Please confirm the length of your stay with the hotel at check-in time. Should you decide to leave earlier, the hotel may charge an early departure fee or for all nights reserved. If you have any questions, please email: WCFLC2009-registration@meet-ics.com



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METHOD of

REGISTRATION is

via the WEB at
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-				
		CFLC 2009 SECRETARIAT TO MA TAYING FOR EMERGENCY CON		LEASE PROVIDE THE NAME OF
	TOTAL P.	AYABLE (Please Add Sections	B, C, D, E, F, G)	TOTAL
Please add	Section B \$Section C \$Section D \$Section E \$Section F \$Section G \$Section			
METHOD OF P	PAYMENT: Payment car	be made by credit card, compa	ny cheque, bank draft, mone	y order, or bank transfer.
□Visa	☐ MasterCard	☐American Express		
Credit Card Numl	ber:			_
Expiry Date:		_ Cardholder's Name:		_
Cardholder's Sign	nature:			_
Charges on your	credit card statement will a	opear as "International Conference S	Services Ltd." And will be convert	ted to your currency.
Form complete		ogether with a copy of the fron		to provide a Credit Card Authorization rd. Please download the Credit Card
☐Cheque (Pers	onal Cheques not accepted)	⊒Bank Draft/Money Order	☐Bank Transfer	
Please ensure bank transfer p		e words "EVENT: "WCFLC 20	<b>09"</b> appear clearly on any ch	heques, bank drafts, money orders or
Make cheque:	s payable to "Internat	onal Conference Services c	o WCFLC 2009."	
Bank Transfer	s: Beneficiary Name:  Beneficiary Bank:	International Conference Servi Suite 2101 – 1177 West Hastir Vancouver, BC V6E 2K3 CAN HSBC Bank of Canada Swift C	ngs Street NADA	
	Beneficiary Account:		0.000	

Cheques, bank drafts and money orders will only be accepted in CAD dollars and must be drawn on a Canadian Bank. It is the Delegate's responsibility to ensure all bank transfer fees are paid over and above the registration fees owed. Otherwise, Delegates will be asked to pay any outstanding balance at the on-site registration desk.

Institution #016

HSBC Canada

885 West Georgia Street

Vancouver, BC V6C 3G1 CANADA

Bank Address:

**REGISTRATION - REFUND & CANCELLATION POLICY:** Registration cancellations received in writing at the WCFLC 2009 Congress Secretariat's address by **Friday, July 3, 2009** will be accepted and all fees refunded, less a \$150 CAD administrative fee (as per committee policy). Cancellations received after **Friday, July 3, 2009** will not be accepted or refunded; however, transfer of your registration to another person is acceptable. A completed Registration Form for the new person must be faxed or mailed to the Congress Secretariat prior to the Congress, explaining who is being replaced. <u>DO NOT</u> USE THE ON-LINE REGISTRATION FORM FOR THIS PROCEDURE. No refunds will be made for non-attendance at the Congress.